STATE OF DELAWARE SINGLE POINT OF CONTACT – SPOC INTERGOVERNMENTAL REVIEW OF FEDERAL PROGRAMS

Office of Management and Budget
Haslet Building, 3rd Floor, Dover, Delaware 19901
(302) 739-4206

1.	STATE APPLICATION IDENTIFIER:									
09-03-12-02			SPOO	C use C	ONLY	Month		Reviewer	CC's	
			0.00							
2.	Applicant Project Title: American Recovery and Reinve	stment Act	of 2009 (ARRA), Worl	xforce Inve	estment Act (NΙΑ),	Title I, Youth Act	ivities	
3.	Applicant Department: Department of Labor	4. Applic	4. Applicant Division/APU: Division of Employment and Training							
5.	Applicant Address: 4425 North Market Street, Wilmington, Delaware 19802 (N250)									
6.	Contact Person: Robert Clarkin		7. Contact Person's Phone Number: 302-761-8102							
8.	3. Signature of Secretary or Agency Head (for state agencies) or Chief Administrator (for all other applicants)									
	John McMahon, Secretary of Labor									
9.	Federal Grantor Department: United States Department		10. F	ederal Su	ub-Agency:	Employment & Training Administration				
11.	Federal Contact Person: Lenita Jacobs-Simmons			12. Phor	ne Number:	215-	215-861-5205			
13.	3. Address: USDOL/ETA, Suite 825, The Curtis Center, 170 S. Independence Mall West, Philadelphia, PA 19106-3315									
14.	4. Federal Program Title: 15. FEDERAL CATALOG NO: (CFDA)									
	American Recovery and Reinvestment Act of 2009 (ARI Investment Act (WIA), Title I, Youth Activities	RA), Workfo	· /							
16.	Project Description:		•							
	The Recovery Act provides additional funds under existing WIA authority, and the design and delivery of the services for the Recovery Act funds are governed by WIA laws and regulations. ETA strongly encourages states and local areas to use as much of these funds as possible to operate expanded summer youth employment opportunities during the summer of 2009.									
17.	Will funds be utilized for any technology initiatives?							ject summary:		
	Funds will not be used for any technology initiatives.									
18.	Measurable Objectives: a. What were last year's objectives?									
	These are one time funds and were not available last year	:								
	b. Were these objectives met? (If not, please explain w	vhy)								
	These are one time funds and were not available last year									
	c. What are this year's objectives?									
	The USDOL/ETA is developing reporting guidelines for these funds with the intent to minimize any new collection burdens. Final guidance on participant and performance reporting is scheduled to be issued by the end of April, 2009.							participant and		

(If more space is needed, please attach a	separate	sheet of paper)							
19. Grant Period:	20. How been	many years has this project funded:	21. If the project was funded last year, how much federal mone awarded?						
From: 2/17/09				Not applicable.					
To: 6/30/11									
22. Source of funding for this application:			С	Dollars					
a. Federal grant					2,918,025				
b. Other federal funds (Specify source of funding)				0					
c. Required state contribution (Specify source of funding)					0				
d. Discretionary state contribution (Specify source of funding)				0					
e. Required local contribution (Specify source of funding)					0				
f. Other non- federal funds (Specify source of funding)					0				
TOTAL					2,918,025				
23. Budget by cost category and source:		Federal Funds	State Funds	Other Funds	Total Funds				
Salaries & Fringe Benefits		0	0	0	0				
Personal or Contractual Services		11,025	0	0	11,025				
Travel		2,000	0	0	2,000				
Supplies & Materials		5,000	0	0	5,000				
Capital Expenditures		0	0	0	0				
Audit Fees		0	0	0	0				
Indirect Costs		0	0	0	0				
Other (Youth Contracts)		2,900,000	0	0	2,900,000				
TOTAL		2,918,025	0	0	2,918,025				
24. How many positions are required for the	he project	? (Exclude casual/seasonal	employees)						
Breakdown of	s)	Authorized in State Budget	New Positions Required	Total					
Paid for out of federal funds			0	0	0				
Paid for out of General Funds			0	0	0				
Paid for out of state special funds			0	0	0				
Paid for out of bond/local/other funds			0	0	0				
TOTAL		0	0	0					

25.	PLEASE NOTE: On a separate piece of paper, please give position number, grade, yearly salary and percent of funding (federal, state, local, other) and the full-time equivalent for all positions required. Please identify the new positions by placing an asterisk before the position title. If this grant funds positions within other departments, divisions and/or offices, please list them. If a position has been reallocated to or from another grant please indicate the grant source.
	grant please indicate the grant source.